

### Application of Buckel Number

Substitute for Form PTO-875

Application or Packet Number  
10/505/41

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY

Of

OTHER THAN  
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT		(37 CFR 1.16(d))

RATE	FEE
	\$ _____
X \$ _____ =	
X \$ _____ =	
\$ _____ =	
TOTAL	

RATE	FEE
	\$ _____
x \$ _____ =	
x \$ _____ =	
+ \$ _____ =	

10163

\* If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

Of

OTHER THAN  
SMALL ENTITY

AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR + 14600)	11	20
Independent (37 CFR + 14600)	1	3	—

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR + 14600)

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
X \$ _____ =	
TOTAL ADDITIONAL FEE	

SMALL ENTITY	
RATE	ADDITIONAL FEE
1.5 _____ =	
1.5 _____ =	
1.5 _____ =	
TOTAL ADDITIONAL FEE:	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PARENT EXTRA
	TOTAL (2) OF CLAIMS	None	"
	Independent (3) OF CLAIMS	None	"

SUBTOTAL: \$600.00 (2) OF CLAIMS + \$0.00 (3) OF CLAIMS = \$600.00

RATE	ADDITIONAL FEE
1.5 _____ =	
1.5 _____ =	
1.5 _____ =	
TOTAL AMOUNT	

RATE	ADDITIONAL FEE
1. \$ _____	
2. \$ _____	
3. \$ _____	
TOTAL AMOUNT DUE	

AMENDMENT	(Column 1)	(Column 2)	(Column 3)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (3) CFS + (4) B		Minus	=
Independent (3) CFS + (4) B		Minus	=

NOTE: (3) CFS + (4) B = 444,000. (4) B = 100,000. (3) CFS = 344,000.

RATE	ADDITIONAL FEE
1.5	
1.5	
1.5	
10240	
10240	

RATE	ADDITIONAL FEE
1.50	
2.00	
3.00	
4.00	
5.00	
6.00	
7.00	
8.00	
9.00	
10.00	
11.00	
12.00	
13.00	
14.00	
15.00	
16.00	
17.00	
18.00	
19.00	
20.00	
21.00	
22.00	
23.00	
24.00	
25.00	
26.00	
27.00	
28.00	
29.00	
30.00	
31.00	
32.00	
33.00	
34.00	
35.00	
36.00	
37.00	
38.00	
39.00	
40.00	
41.00	
42.00	
43.00	
44.00	
45.00	
46.00	
47.00	
48.00	
49.00	
50.00	
51.00	
52.00	
53.00	
54.00	
55.00	
56.00	
57.00	
58.00	
59.00	
60.00	
61.00	
62.00	
63.00	
64.00	
65.00	
66.00	
67.00	
68.00	
69.00	
70.00	
71.00	
72.00	
73.00	
74.00	
75.00	
76.00	
77.00	
78.00	
79.00	
80.00	
81.00	
82.00	
83.00	
84.00	
85.00	
86.00	
87.00	
88.00	
89.00	
90.00	
91.00	
92.00	
93.00	
94.00	
95.00	
96.00	
97.00	
98.00	
99.00	
100.00	

If the entry in column 1 is less than the entry in column 2, write 0 in column 3.

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With the help of the following procedure, the value of  $\Delta H_{\text{f}}^{\circ}$  of  $\text{SO}_2\text{Cl}_2$  is 125,000 J/mole.

The "Highest Number Previously Paid For" (Total or Independently) is the highest number found in the appropriate box in column 1.

[illegible]